

SOUTH JORDAN CITY POLICE DEPARTMENT

CITIZEN ATTITUDE AND OPINION SURVEY

Name: _____ Incident Type: _____
Case #: _____ Date of Incident: _____
Officer's Name: _____ Today's Date: _____

**Please answer the following questions using the following scale of 1 - 10
(1 being the lowest rating and 10 being highest rating)**

Please explain the rating given in the space provided at the end of each question

1. _____ The response time (time from request for service until officer arrived) was satisfactory

2. _____ The officer had a courteous and helpful attitude and displayed the appropriate amount of concern for the situation.

3. _____ The officer had a professional appearance.

4. _____ When your contact with our officer ended, did you feel that you fully understood how your complaint would be handled and what your responsibilities and alternatives might be?

5. _____ Your overall impression of the service rendered to you by the officer.

Please answer the following questions by responding in the space provided after the question

6. What one thing, if any, impressed you the most with the service given to you?

7. What one thing, if any, disturbed you about the service given to you?

8. What general observations or remarks do you have regarding the service given to you?

9. What recommendations or suggestions do you have that would improve the quality of service given to you?

10. What is your overall impression of the South Jordan City Police Department based upon all of your previous dealings with this organization, if any? *(Please do not include your most recent experience with the South Jordan City Police Department.)*

If we have further questions, may we contact you? If so, what is your preferred means of communication? i.e. telephone; Email, etc. Provide contact information: _____

Please return this survey